Fill in this information to identify your case:

Debtor 1 Fernando Arturo Stallart
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the Eastern District of N.Y.

Case number 17-40310-CEC
(If known)

CLERK
U.S. BANKRUPTCY COURT
EASTERN DISTRICT OF
NEW YORK

2017 FEB 13 P 12:07

RECEIVED

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

	Your assets Value of what you own
1. *Schedule A/B: Property* (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from *Schedule A/B*	$ 500,000.
1b. Copy line 62, Total personal property, from *Schedule A/B*	$ 10,100.
1c. Copy line 63, Total of all property on *Schedule A/B*	$ 510,100.

Part 2: Summarize Your Liabilities

	Your liabilities Amount you owe
2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)	
2a. Copy the total you listed in Column A, *Amount of claim,* at the bottom of the last page of Part 1 of *Schedule D*	$ 225,000
3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of *Schedule E/F*	$ –
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of *Schedule E/F*	+ $ –
Your total liabilities	$ 225,000.

Part 3: Summarize Your Income and Expenses

4. *Schedule I: Your Income* (Official Form 106I) Copy your combined monthly income from line 12 of *Schedule I*	$ 2,000.
5. *Schedule J: Your Expenses* (Official Form 106J) Copy your monthly expenses from line 22c of *Schedule J*	$

Debtor 1 ______________________________ Case number *(if known)* ______________________
First Name Middle Name Last Name

Part 4: Answer These Questions for Administrative and Statistical Records

6. **Are you filing for bankruptcy under Chapters 7, 11, or 13?**

☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
☐ Yes

7. **What kind of debt do you have?**

☐ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the *Statement of Your Current Monthly Income*:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. $ __________

9. **Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:**

From Part 4 on *Schedule E/F*, copy the following:	**Total claim**
9a. Domestic support obligations (Copy line 6a.)	$__________
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	$__________
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	$__________
9d. Student loans. (Copy line 6f.)	$__________
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	$__________
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ $__________
9g. **Total.** Add lines 9a through 9f.	$__________

Fill in this information to identify your case and this filing:

Debtor 1 FERNANDO ARTURO SAILLANT
First Name Middle Name Last Name

Debtor 2 —
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: EASTERN District of N.Y.

Case number 17-40310-cec

CLERK
U.S. BANKRUPTCY COURT
EASTERN DISTRICT OF
NEW YORK

2017 FEB 13 P 12:07

RECEIVED

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. **Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

☐ No. Go to Part 2.
☑ Yes. Where is the property?

1.1. 510 MARION ST.
Street address, if available, or other description

BROOKLYN, NY 11233
City State ZIP Code

KINGS
County

What is the property? Check all that apply.
☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☑ Other 1 STORE + 1 APT.

Who has an interest in the property? Check one.
☑ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: ~

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property?	**Current value of the portion you own?**
$ 500,000.	$ 500,000.

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ **Check if this is community property** (see instructions)

If you own or have more than one, list here:

1.2. —
Street address, if available, or other description

—

—
City State ZIP Code

—
County

What is the property? Check all that apply.
☑ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☑ Other STORE

Who has an interest in the property? Check one.
☑ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property?	**Current value of the portion you own?**
$ 500,000.	$ 500,000.

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ **Check if this is community property** (see instructions)

Debtor 1 FERNANDO ARTURO SAILLANT
First Name Middle Name Last Name

Case number (if known) 17-40310-cec

1.3. Street address, if available, or other description

510 MARION ST.

BROOKLYN NY 11233
City State ZIP Code

KINGS
County

What is the property? Check all that apply.
- ☐ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☑ Other STORE + 1 FAMILY

Who has an interest in the property? Check one.
- ☑ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: ____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property?	Current value of the portion you own?
$ 500,000	$ 500,000.

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ **Check if this is community property** (see instructions)

2. **Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.** .... ➔ $ 500,000.

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases.*

3. **Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**
- ☒ No
- ☐ Yes

3.1. Make: N/A
Model:
Year:
Approximate mileage:
Other information:

Who has an interest in the property? Check one.
- ☑ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property?	Current value of the portion you own?
$ 500,000.	$ 500,000.

If you own or have more than one, describe here:

3.2. Make:
Model:
Year:
Approximate mileage:
Other information:

Who has an interest in the property? Check one.
- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property?	Current value of the portion you own?
$ 500,000.	$ 500,000.

Debtor 1 FERNANDO ARTURO SAILLANT
First Name Middle Name Last Name

Case number (if known) 17-40310-cec

3.3. Make: —
Model:
Year:
Approximate mileage:
Other information:

Who has an interest in the property? Check one.
☑ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property? $500,000
Current value of the portion you own? $500,000

3.4. Make: —
Model:
Year:
Approximate mileage:
Other information:

Who has an interest in the property? Check one.
☑ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property? $500,000.
Current value of the portion you own? $500,000.

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**
Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories
☒ No
☐ Yes

4.1. Make: —
Model:
Year:
Other information:

Who has an interest in the property? Check one.
☑ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property? $500,000.
Current value of the portion you own? $500,000

If you own or have more than one, list here:

4.2. Make: —
Model:
Year:
Other information:

Who has an interest in the property? Check one.
☑ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property? $500,000
Current value of the portion you own? $500,000

5. **Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here** .... ➔ $500,000

Debtor 1 FERNANDO ARTURO SAILLANT (First Name / Middle Name / Last Name) Case number (if known) 17-40310-cec

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own? Do not deduct secured claims or exemptions.

6. **Household goods and furnishings**
   Examples: Major appliances, furniture, linens, china, kitchenware
   ☐ No
   ☑ Yes. Describe......... CONTENTS OF APARTMENT — $ 3,000.

7. **Electronics**
   Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games
   ☐ No
   ☑ Yes. Describe.......... ~~CELL PHONE~~, CAMERA, TV, 3 COMPUTERS, 3 PRINTERS, 1 SCANNER, — $ 4,000.

8. **Collectibles of value**
   Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles
   ☑ No
   ☐ Yes. Describe.......... — $ —

9. **Equipment for sports and hobbies**
   Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments
   ☑ No
   ☐ Yes. Describe.......... — $ —

10. **Firearms**
    Examples: Pistols, rifles, shotguns, ammunition, and related equipment
    ☑ No
    ☐ Yes. Describe.......... — $ —

11. **Clothes**
    Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories
    ☐ No
    ☑ Yes. Describe.......... CASUAL CLOTHES — $ 2,000.

12. **Jewelry**
    Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver
    ☑ No
    ☐ Yes. Describe.......... — $ —

13. **Non-farm animals**
    Examples: Dogs, cats, birds, horses
    ☑ No
    ☐ Yes. Describe.......... — $ —

14. **Any other personal and household items you did not already list, including any health aids you did not list**
    ☑ No
    ☐ Yes. Give specific information. .... — $ —

15. **Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here** .... ➔ $ 9,000.

Debtor 1 FERNANDO ARTURO SAILLANT Case number (if known) 17-40310-cec
First Name Middle Name Last Name

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. **Cash**
Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No
☑ Yes .... Cash: ✓ .... $ 200.

17. **Deposits of money**
Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No
☑ Yes ....

	Institution name:	
17.1. Checking account:	M+T BANK-BUSINESS	$ 700,00
17.2. Checking account:		$
17.3. Savings account:	CHASE-DEBIT-VISA	$ 2 00.00
17.4. Savings account:		$
17.5. Certificates of deposit:		$
17.6. Other financial account:		$
17.7. Other financial account:		$
17.8. Other financial account:		$
17.9. Other financial account:		$

18. **Bonds, mutual funds, or publicly traded stocks**
Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☑ No
☐ Yes .... Institution or issuer name:

	$
	$
	$

19. **Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

☑ No
☐ Yes. Give specific information about them........

Name of entity:	% of ownership:	
	0% %	$
	0% %	$
	0% %	$

Debtor 1 FERNANDO ARTURO SAILLANT Case number (if known) 17-40310-cec
First Name Middle Name Last Name

20. **Government and corporate bonds and other negotiable and non-negotiable instruments**

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☑ No
☐ Yes. Give specific information about them...................... Issuer name:

	$
	$
	$

21. **Retirement or pension accounts**

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☑ No
☐ Yes. List each account separately.

Type of account:	Institution name:	
401(k) or similar plan:		$
Pension plan:		$
IRA:		$
Retirement account:		$
Keogh:		$
Additional account:		$
Additional account:		$

22. **Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☑ No
☐ Yes.........................

	Institution name or individual:	
Electric:		$
Gas:		$
Heating oil:		$
Security deposit on rental unit:		$
Prepaid rent:		$
Telephone:		$
Water:		$
Rented furniture:		$
Other:		$

23. **Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

☑ No
☐ Yes......................... Issuer name and description:

	$
	$
	$ /

Debtor 1 FERNANDO ARTURO SAILLANT Case number (if known) 17-40310-cec
First Name Middle Name Last Name

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.
26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☑ No
☐ Yes .... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

$
$
$

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

☑ No
☐ Yes. Give specific information about them.... $

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property
Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☑ No
☐ Yes. Give specific information about them.... $

27. Licenses, franchises, and other general intangibles
Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☑ No
☐ Yes. Give specific information about them.... $

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

☑ No
☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years. ....

Federal: $
State: $
Local: $

29. Family support
Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☑ No
☐ Yes. Give specific information.............

Alimony: $
Maintenance: $
Support: $
Divorce settlement: $
Property settlement: $

30. Other amounts someone owes you
Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☑ No
☐ Yes. Give specific information.............. $

Debtor 1 FERNANDO ARTURO SAILLANT (First Name / Middle Name / Last Name)   Case number (if known) 17-40310-cec

31. **Interests in insurance policies**
Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

- ☐ No
- ☑ Yes. Name the insurance company of each policy and list its value. ...

Company name:	Beneficiary:	Surrender or refund value:
NYS MEDICAID	-	$
		$
		$

32. **Any interest in property that is due you from someone who has died**
If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- ☑ No
- ☐ Yes. Give specific information............. $

33. **Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**
Examples: Accidents, employment disputes, insurance claims, or rights to sue

- ☑ No
- ☐ Yes. Describe each claim. .... $

34. **Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

- ☑ No
- ☐ Yes. Describe each claim. .... $

35. **Any financial assets you did not already list**

- ☑ No
- ☐ Yes. Give specific information............ $

36. **Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here** .... ➔ $ 1,100.

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. **Do you own or have any legal or equitable interest in any business-related property?**

- ☑ No. Go to Part 6.
- ☐ Yes. Go to line 38.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

38. **Accounts receivable or commissions you already earned**

- ☐ No
- ☐ Yes. Describe....... $

39. **Office equipment, furnishings, and supplies**
Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

- ☐ No
- ☐ Yes. Describe....... $

Debtor 1 ______________________________ Case number (*if known*) ______________
First Name Middle Name Last Name

40. **Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**

❑ No
❑ Yes. Describe....... $________

41. **Inventory**

❑ No
❑ Yes. Describe....... $________

42. **Interests in partnerships or joint ventures**

❑ No
❑ Yes. Describe....... Name of entity: % of ownership:

Name of entity	% of ownership	
	____%	$
	____%	$
	____%	$

43. **Customer lists, mailing lists, or other compilations**

❑ No
❑ Yes. **Do your lists include personally identifiable information** (as defined in 11 U.S.C. § 101(41A))?

❑ No
❑ Yes. Describe........ $________

44. **Any business-related property you did not already list**

❑ No
❑ Yes. Give specific information ....

	$
	$
	$
	$
	$
	$

45. **Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here** .... ➔ $________

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. **Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

☑ No. Go to Part 7.
❑ Yes. Go to line 47.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

47. **Farm animals**

Examples: Livestock, poultry, farm-raised fish

☑ No
❑ Yes .... $________

Debtor 1 ______________________ First Name Middle Name Last Name   Case number (if known) ______________________

48. **Crops—either growing or harvested**

- ☐ No
- ☐ Yes. Give specific information. .... $________

49. **Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

- ☐ No
- ☐ Yes .... $________

50. **Farm and fishing supplies, chemicals, and feed**

- ☐ No
- ☐ Yes .... $________

51. **Any farm- and commercial fishing-related property you did not already list**

- ☐ No
- ☐ Yes. Give specific information. .... $________

52. **Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here** .... ➔ $________

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. **Do you have other property of any kind you did not already list?**
Examples: Season tickets, country club membership

- ☑ No
- ☐ Yes. Give specific information. .... $________ $________ $________

54. **Add the dollar value of all of your entries from Part 7. Write that number here** .... ➔ $ -0-

Part 8: List the Totals of Each Part of this Form

55. **Part 1: Total real estate, line 2**		➔	$ 500,000
56. **Part 2: Total vehicles, line 5**	$ -0-		
57. **Part 3: Total personal and household items, line 15**	$ 9,000.		
58. **Part 4: Total financial assets, line 36**	$ 1,100.		
59. **Part 5: Total business-related property, line 45**	$ -0-		
60. **Part 6: Total farm- and fishing-related property, line 52**	$ -0-		
61. **Part 7: Total other property not listed, line 54**	+ $ -0-		
62. **Total personal property.** Add lines 56 through 61.	$ 10,100.	Copy personal property total ➔	+ $ 10,100.
63. **Total of all property on Schedule A/B.** Add line 55 + line 62.			$ 510,100.

Fill in this information to identify your case:

Debtor 1 FERNANDO ARTURO SAILLANT
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: EASTERN District of N.Y.

Case number 17-40310-cec
(If known)

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. **Which set of exemptions are you claiming?** *Check one only, even if your spouse is filing with you.*
   - ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
   - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. **For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.**

Brief description of the property and line on *Schedule A/B* that lists this property	Current value of the portion you own Copy the value from *Schedule A/B*	Amount of the exemption you claim *Check only one box for each exemption.*	Specific laws that allow exemption
Brief description: ______ Line from *Schedule A/B*: ______	$______	☐ $______ ☐ 100% of fair market value, up to any applicable statutory limit	______
Brief description: ______ Line from *Schedule A/B*: ______	$______	☐ $______ ☐ 100% of fair market value, up to any applicable statutory limit	______
Brief description: ______ Line from *Schedule A/B*: ______	$______	☐ $______ ☐ 100% of fair market value, up to any applicable statutory limit	______

3. **Are you claiming a homestead exemption of more than $160,375?**
   (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)
   - ☐ No
   - ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
     - ☐ No
     - ☐ Yes

Debtor 1 ______________________________ Case number *(if known)*______________________
First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on *Schedule A/B* that lists this property	Current value of the portion you own Copy the value from *Schedule A/B*	Amount of the exemption you claim *Check only one box for each exemption*	Specific laws that allow exemption
Brief description: ________ Line from *Schedule A/B:* ____	$________	☐ $________ ☐ 100% of fair market value, up to any applicable statutory limit	________
Brief description: ________ Line from *Schedule A/B:* ____	$________	☐ $________ ☐ 100% of fair market value, up to any applicable statutory limit	________
Brief description: ________ Line from *Schedule A/B:* ____	$________	☐ $________ ☐ 100% of fair market value, up to any applicable statutory limit	________
Brief description: ________ Line from *Schedule A/B:* ____	$________	☐ $________ ☐ 100% of fair market value, up to any applicable statutory limit	________
Brief description: ________ Line from *Schedule A/B:* ____	$________	☐ $________ ☐ 100% of fair market value, up to any applicable statutory limit	________
Brief description: ________ Line from *Schedule A/B:* ____	$________	☐ $________ ☐ 100% of fair market value, up to any applicable statutory limit	________
Brief description: ________ Line from *Schedule A/B:* ____	$________	☐ $________ ☐ 100% of fair market value, up to any applicable statutory limit	________
Brief description: ________ Line from *Schedule A/B:* ____	$________	☐ $________ ☐ 100% of fair market value, up to any applicable statutory limit	________
Brief description: ________ Line from *Schedule A/B:* ____	$________	☐ $________ ☐ 100% of fair market value, up to any applicable statutory limit	________
Brief description: ________ Line from *Schedule A/B:* ____	$________	☐ $________ ☐ 100% of fair market value, up to any applicable statutory limit	________
Brief description: ________ Line from *Schedule A/B:* ____	$________	☐ $________ ☐ 100% of fair market value, up to any applicable statutory limit	________
Brief description: ________ Line from *Schedule A/B:* ____	$________	☐ $________ ☐ 100% of fair market value, up to any applicable statutory limit	________

Fill in this information to identify your case:

Debtor 1 ______ First Name Middle Name Last Name

Debtor 2 (Spouse, if filing) ______ First Name Middle Name Last Name

United States Bankruptcy Court for the: ______ District of ______

Case number (If known) ______

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. **Do any creditors have claims secured by your property?**
   - ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
   - ☑ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. **List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A **Amount of claim** Do not deduct the value of collateral. | *Column B* **Value of collateral that supports this claim** | *Column C* **Unsecured portion** If any

2.1 TILSIM GROUP
Creditor's Name
228 MONTROSE AV.
Number Street

BROOKLYN, NY 11206
City State ZIP Code

Describe the property that secures the claim: 510 MARION STREET BROOKLYN, N.Y. 11233

Column A: $225,000 Column B: $______ Column C: $______

As of the date you file, the claim is: Check all that apply.
- ☐ Contingent
- ☐ Unliquidated
- ☑ Disputed

Who owes the debt? Check one.
- ☑ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this claim relates to a community debt**

Nature of lien. Check all that apply.
- ☑ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☐ Other (including a right to offset) ______

Date debt was incurred 6/1/2007 Last 4 digits of account number ___ ___ ___ ___

2.2 ______
Creditor's Name
______
Number Street
______
City State ZIP Code

Describe the property that secures the claim: ______

Column A: $______ Column B: $______ Column C: $______

As of the date you file, the claim is: Check all that apply.
- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Who owes the debt? Check one.
- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this claim relates to a community debt**

Nature of lien. Check all that apply.
- ☐ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☐ Other (including a right to offset) ______

Date debt was incurred ______ Last 4 digits of account number ___ ___ ___ ___

Add the dollar value of your entries in Column A on this page. Write that number here: $______

Debtor 1 FERNANDO A. SAILLANT (First Name / Middle Name / Last Name)

Case number (if known) 17-40310-cec

Part 1: **Additional Page**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

	Column A: Amount of claim (Do not deduct the value of collateral.)	Column B: Value of collateral that supports this claim	Column C: Unsecured portion (If any)
Entry 1	$	$	$
Entry 2	$	$	$
Entry 3	$	$	$

Entry 1

☐ TILSIM GROUP

Creditor's Name

228 MONTROSE AVE.

Number Street

BROOKLYN NY 11206

City State ZIP Code

Describe the property that secures the claim:

As of the date you file, the claim is: Check all that apply.
- ☐ Contingent
- ☐ Unliquidated
- ☒ Disputed

Who owes the debt? Check one.
- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this claim relates to a community debt**

Nature of lien. Check all that apply.
- ☒ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☐ Other (including a right to offset) ____________

Date debt was incurred 6/1/2007

Last 4 digits of account number ___ ___ ___ ___

Entry 2

☐ ____________

Creditor's Name

____

Number Street

____

City State ZIP Code

Describe the property that secures the claim:

As of the date you file, the claim is: Check all that apply.
- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Who owes the debt? Check one.
- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this claim relates to a community debt**

Nature of lien. Check all that apply.
- ☐ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☐ Other (including a right to offset) ____________

Date debt was incurred ____________

Last 4 digits of account number ___ ___ ___ ___

Entry 3

☐ ____________

Creditor's Name

____

Number Street

____

City State ZIP Code

Describe the property that secures the claim:

As of the date you file, the claim is: Check all that apply.
- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Who owes the debt? Check one.
- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this claim relates to a community debt**

Nature of lien. Check all that apply.
- ☐ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☐ Other (including a right to offset) ____________

Date debt was incurred ____________

Last 4 digits of account number ___ ___ ___ ___

Add the dollar value of your entries in Column A on this page. Write that number here: $____________

If this is the last page of your form, add the dollar value totals from all pages. Write that number here: $____________

Debtor 1 FERNANDO A SAILCANT (First Name, Middle Name, Last Name) Case number (if known) 17-40310-cec

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

☐ Name ______ Number Street ______ City State ZIP Code ______
On which line in Part 1 did you enter the creditor? _____
Last 4 digits of account number ___ ___ ___ ___

☐ Name ______ Number Street ______ City State ZIP Code ______
On which line in Part 1 did you enter the creditor? _____
Last 4 digits of account number ___ ___ ___ ___

☐ Name ______ Number Street ______ City State ZIP Code ______
On which line in Part 1 did you enter the creditor? _____
Last 4 digits of account number ___ ___ ___ ___

☐ Name ______ Number Street ______ City State ZIP Code ______
On which line in Part 1 did you enter the creditor? _____
Last 4 digits of account number ___ ___ ___ ___

☐ Name ______ Number Street ______ City State ZIP Code ______
On which line in Part 1 did you enter the creditor? _____
Last 4 digits of account number ___ ___ ___ ___

☐ Name ______ Number Street ______ City State ZIP Code ______
On which line in Part 1 did you enter the creditor? _____
Last 4 digits of account number ___ ___ ___ ___

Fill in this information to identify your case:

Debtor 1 FERNANO ARTURO SAILLANT
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: EASTERN District of N.Y.

Case number 17-40310-CEC
(If known)

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property.* If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. **Do any creditors have priority unsecured claims against you?**
   ☐ No. Go to Part 2.
   ☐ Yes.

2. **List all of your priority unsecured claims.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.
   (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim | Priority amount | Nonpriority amount

2.1

Priority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ **Check if this claim is for a community debt**

Is the claim subject to offset?
☐ No
☐ Yes

Last 4 digits of account number ____ $______ $______ $______

When was the debt incurred? ______

As of the date you file, the claim is: Check all that apply
☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:
☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify ______

2.2

Priority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ **Check if this claim is for a community debt**

Is the claim subject to offset?
☐ No
☐ Yes

Last 4 digits of account number ____ $______ $______ $______

When was the debt incurred? ______

As of the date you file, the claim is: Check all that apply
☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:
☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify ______

Debtor 1 ______________________________ Case number (if known)______________________
First Name Middle Name Last Name

Part 1: Your PRIORITY Unsecured Claims — Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
☐ ______________________ Priority Creditor's Name ______________________ Number Street ______________________ ______________________ City State ZIP Code **Who incurred the debt?** Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ **Check if this claim is for a community debt** **Is the claim subject to offset?** ☐ No ☐ Yes **Last 4 digits of account number** ___ ___ ___ ___ **When was the debt incurred?** ________ **As of the date you file, the claim is:** Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed **Type of PRIORITY unsecured claim:** ☐ Domestic support obligations ☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify ______________	$________	$________	$________
☐ ______________________ Priority Creditor's Name ______________________ Number Street ______________________ ______________________ City State ZIP Code **Who incurred the debt?** Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ **Check if this claim is for a community debt** **Is the claim subject to offset?** ☐ No ☐ Yes **Last 4 digits of account number** ___ ___ ___ ___ **When was the debt incurred?** ________ **As of the date you file, the claim is:** Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed **Type of PRIORITY unsecured claim:** ☐ Domestic support obligations ☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify ______________	$________	$________	$________
☐ ______________________ Priority Creditor's Name ______________________ Number Street ______________________ ______________________ City State ZIP Code **Who incurred the debt?** Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ **Check if this claim is for a community debt** **Is the claim subject to offset?** ☐ No ☐ Yes **Last 4 digits of account number** ___ ___ ___ ___ **When was the debt incurred?** ________ **As of the date you file, the claim is:** Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed **Type of PRIORITY unsecured claim:** ☐ Domestic support obligations ☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify ______________	$________	$________	$________

Debtor 1 ______________________________ Case number (if known)______________
First Name Middle Name Last Name

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☐ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

4.1

Nonpriority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☐ No
☐ Yes

Last 4 digits of account number __ __ __ __ $______

When was the debt incurred? ______

As of the date you file, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify ______

4.2

Nonpriority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☐ No
☐ Yes

Last 4 digits of account number __ __ __ __ $______

When was the debt incurred? ______

As of the date you file, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify ______

4.3

Nonpriority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☐ No
☐ Yes

Last 4 digits of account number __ __ __ __ $______

When was the debt incurred? ______

As of the date you file, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify ______

Debtor 1 ______________________________ Case number (if known)______________________
First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total claim**

☐ ______________________________
Nonpriority Creditor's Name
____
Number Street
____
City State ZIP Code

Who incurred the debt? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?
☐ No
☐ Yes

Last 4 digits of account number ___ ___ ___ ___ $__________

When was the debt incurred? __________

As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Type of **NONPRIORITY** unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify______________________

☐ ______________________________
Nonpriority Creditor's Name
____
Number Street
____
City State ZIP Code

Who incurred the debt? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?
☐ No
☐ Yes

Last 4 digits of account number ___ ___ ___ ___ $__________

When was the debt incurred? __________

As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Type of **NONPRIORITY** unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify______________________

☐ ______________________________
Nonpriority Creditor's Name
____
Number Street
____
City State ZIP Code

Who incurred the debt? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?
☐ No
☐ Yes

Last 4 digits of account number ___ ___ ___ ___ $__________

When was the debt incurred? __________

As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Type of **NONPRIORITY** unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify______________________

Debtor 1 ______________________________ Case number (if known) ______________
First Name Middle Name Last Name

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name
Number Street
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number ___ ___ ___ ___

Name
Number Street
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number ___ ___ ___ ___

Name
Number Street
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number ___ ___ ___ ___

Name
Number Street
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number ___ ___ ___ ___

Name
Number Street
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number ___ ___ ___ ___

Name
Number Street
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number ___ ___ ___ ___

Name
Number Street
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number ___ ___ ___ ___

Debtor 1 ______________________________ Case number (*if known*)______________________
First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims from Part 1	6a. **Domestic support obligations**	6a.	$__________
	6b. **Taxes and certain other debts you owe the government**	6b.	$__________
	6c. **Claims for death or personal injury while you were intoxicated**	6c.	$__________
	6d. **Other.** Add all other priority unsecured claims. Write that amount here.	6d.	+ $__________
	6e. **Total.** Add lines 6a through 6d.	6e.	$__________

			Total claim
Total claims from Part 2	6f. **Student loans**	6f.	$__________
	6g. **Obligations arising out of a separation agreement or divorce that you did not report as priority claims**	6g.	$__________
	6h. **Debts to pension or profit-sharing plans, and other similar debts**	6h.	$__________
	6i. **Other.** Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ $__________
	6j. **Total.** Add lines 6f through 6i.	6j.	$__________

Fill in this information to identify your case:

Debtor FERNANDO ARCVEO SAILLANT
First Name Middle Name Last Name

Debtor 2
(Spouse If filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: EASTERN District of N.Y.

Case number 17-40310-cec
(If known)

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. **Do you have any executory contracts or unexpired leases?**
   ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
   ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. **List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone).** See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	Name Number Street City State ZIP Code	
2.2	Name Number Street City State ZIP Code	
2.3	Name Number Street City State ZIP Code	
2.4	Name Number Street City State ZIP Code	
2.5	Name Number Street City State ZIP Code	

Debtor 1 ______________________________ Case number (if known) ______________________
First Name Middle Name Last Name

Additional Page if You Have More Contracts or Leases

Person or company with whom you have the contract or lease	What the contract or lease is for
2.2 Name Number Street City State ZIP Code	
2._ Name Number Street City State ZIP Code	
2._ Name Number Street City State ZIP Code	
2._ Name Number Street City State ZIP Code	
2._ Name Number Street City State ZIP Code	
2._ Name Number Street City State ZIP Code	
2._ Name Number Street City State ZIP Code	
2._ Name Number Street City State ZIP Code	

Fill in this information to identify your case:

Debtor 1 Fernando Arturo Saillant
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of N.Y.

Case number 17-40310-cec
(If known)

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)
   - ☑ No
   - ☐ Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (*Community property states and territories* include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)
   - ☑ No. Go to line 3.
   - ☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
     - ☐ No
     - ☐ Yes. In which community state or territory did you live? ________________. Fill in the name and current address of that person.

   ____
   Name of your spouse, former spouse, or legal equivalent

   ____
   Number Street

   ____
   City State ZIP Code

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on *Schedule D* (Official Form 106D), *Schedule E/F* (Official Form 106E/F), or *Schedule G* (Official Form 106G). Use *Schedule D, Schedule E/F,* or *Schedule G* to fill out Column 2.**

	Column 1: **Your codebtor**	*Column 2:* **The creditor to whom you owe the debt** Check all schedules that apply:
3.1	Name Number Street City State ZIP Code	☐ Schedule D, line ______ ☐ Schedule E/F, line ______ ☐ Schedule G, line ______
3.2	Name Number Street City State ZIP Code	☐ Schedule D, line ______ ☐ Schedule E/F, line ______ ☐ Schedule G, line ______
3.3	Name Number Street City State ZIP Code	☐ Schedule D, line ______ ☐ Schedule E/F, line ______ ☐ Schedule G, line ______

Debtor 1 ______________________________ Case number (if known) ______________
First Name Middle Name Last Name

Additional Page to List More Codebtors

Column 1: **Your codebtor**	*Column 2:* **The creditor to whom you owe the debt**
	Check all schedules that apply:
3._ Name ___ Number Street ___ City State ZIP Code ___	☐ Schedule D, line ___ ☐ Schedule E/F, line ___ ☐ Schedule G, line ___
3._ Name ___ Number Street ___ City State ZIP Code ___	☐ Schedule D, line ___ ☐ Schedule E/F, line ___ ☐ Schedule G, line ___
3._ Name ___ Number Street ___ City State ZIP Code ___	☐ Schedule D, line ___ ☐ Schedule E/F, line ___ ☐ Schedule G, line ___
3._ Name ___ Number Street ___ City State ZIP Code ___	☐ Schedule D, line ___ ☐ Schedule E/F, line ___ ☐ Schedule G, line ___
3._ Name ___ Number Street ___ City State ZIP Code ___	☐ Schedule D, line ___ ☐ Schedule E/F, line ___ ☐ Schedule G, line ___
3._ Name ___ Number Street ___ City State ZIP Code ___	☐ Schedule D, line ___ ☐ Schedule E/F, line ___ ☐ Schedule G, line ___
3._ Name ___ Number Street ___ City State ZIP Code ___	☐ Schedule D, line ___ ☐ Schedule E/F, line ___ ☐ Schedule G, line ___
3._ Name ___ Number Street ___ City State ZIP Code ___	☐ Schedule D, line ___ ☐ Schedule E/F, line ___ ☐ Schedule G, line ___

Fill in this information to identify your case:

Debtor 1: FERNANDO ARTURO SAILLANT (First Name / Middle Name / Last Name)

Debtor 2 (Spouse, if filing): First Name / Middle Name / Last Name

United States Bankruptcy Court for the: EASTER District of N.Y.

Case number (If known): 17 40310 - cec

Check if this is:
- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date: MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. **Fill in your employment information.**

   If you have more than one job, attach a separate page with information about additional employers.

   Include part-time, seasonal, or self-employed work.

   Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	☒ Employed ☐ Not employed	☐ Employed ☐ Not employed
Occupation	REAL ESTATE ASST	
Employer's name		
Employer's address	Number Street City State ZIP Code	Number Street City State ZIP Code
How long employed there?	5 YRS.	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write $0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

		For Debtor 1	For Debtor 2 or non-filing spouse
2. **List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	$2,000.	$
3. **Estimate and list monthly overtime pay.**	3.	+ $ —	+ $
4. **Calculate gross income.** Add line 2 + line 3.	4.	$2,000.	$

Debtor 1 FERNANDO ARTURO SAICLANT (First Name / Middle Name / Last Name) Case number (if known) 17-40310-cec

		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	4.	$ 2,000	$	
5. List all payroll deductions:				
5a. **Tax, Medicare, and Social Security deductions**	5a.	$	$	
5b. **Mandatory contributions for retirement plans**	5b.	$	$	
5c. **Voluntary contributions for retirement plans**	5c.	$	$	
5d. **Required repayments of retirement fund loans**	5d.	$	$	
5e. **Insurance**	5e.	$	$	
5f. **Domestic support obligations**	5f.	$	$	
5g. **Union dues**	5g.	$	$	
5h. **Other deductions.** Specify: ____	5h.	+ $	+ $	
6. **Add the payroll deductions.** Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	$	$	
7. **Calculate total monthly take-home pay.** Subtract line 6 from line 4.	7.	$	$	
8. List all other income regularly received:				
8a. **Net income from rental property and from operating a business, profession, or farm** Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	$	$	
8b. **Interest and dividends**	8b.	$	$	
8c. **Family support payments that you, a non-filing spouse, or a dependent regularly receive** Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	$	$	
8d. **Unemployment compensation**	8d.	$	$	
8e. **Social Security**	8e.	$	$	
8f. **Other government assistance that you regularly receive** Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: ____	8f.	$	$	
8g. **Pension or retirement income**	8g.	$	$	
8h. **Other monthly income.** Specify: ____	8h.	+ $	+ $	
9. **Add all other income.** Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	$	$	
10. **Calculate monthly income.** Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	$	+ $	= $

11. **State all other regular contributions to the expenses that you list in *Schedule J*.**
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in *Schedule J*.
Specify: ____ 11. + $____

12. **Add the amount in the last column of line 10 to the amount in line 11.** The result is the combined monthly income. Write that amount on the *Summary of Your Assets and Liabilities and Certain Statistical Information*, if it applies 12. $____
Combined monthly income

13. **Do you expect an increase or decrease within the year after you file this form?**
☐ No.
☐ Yes. Explain:

Fill in this information to identify your case:

Debtor 1 Fernando Arturo Saillant
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the Eastern District of NY

Case number 17-40310 - CEC
(If known)

Check if this is:

- [ ] An amended filing
- [ ] A supplement showing postpetition chapter 13 expenses as of the following date:
  MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. **Is this a joint case?**
   - [x] No. Go to line 2.
   - [ ] Yes. **Does Debtor 2 live in a separate household?**
     - [ ] No
     - [ ] Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2.*

2. **Do you have dependents?**
   Do not list Debtor 1 and Debtor 2.
   Do not state the dependents' names.
   - [x] No
   - [ ] Yes. Fill out this information for each dependent..........................

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
		[ ] No [ ] Yes
		[ ] No [ ] Yes
		[ ] No [ ] Yes
		[ ] No [ ] Yes
		[ ] No [ ] Yes

3. **Do your expenses include expenses of people other than yourself and your dependents?**
   - [x] No
   - [ ] Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

		Your expenses
4. **The rental or home ownership expenses for your residence.** Include first mortgage payments and any rent for the ground or lot.	4.	$ —
If not included in line 4:		
4a. Real estate taxes	4a.	$ 1,600.
4b. Property, homeowner's, or renter's insurance	4b.	$ —
4c. Home maintenance, repair, and upkeep expenses	4c.	$ 200.
4d. Homeowner's association or condominium dues	4d.	$ —

Debtor 1 FERNANDO ARTURO SAICLANI
First Name Middle Name Last Name

Case number (if known) 17-40310-cec

		Your expenses
5. **Additional mortgage payments for your residence**, such as home equity loans	5.	$ —
6. **Utilities:**		
6a. Electricity, heat, natural gas	6a.	$ 350.
6b. Water, sewer, garbage collection	6b.	$ 600.
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	$ 170.
6d. Other. Specify:	6d.	$ —
7. **Food and housekeeping supplies**	7.	$ 250.
8. **Childcare and children's education costs**	8.	$ —
9. **Clothing, laundry, and dry cleaning**	9.	$ 40.
10. **Personal care products and services**	10.	$ 10.
11. **Medical and dental expenses**	11.	$ —
12. **Transportation.** Include gas, maintenance, bus or train fare. Do not include car payments.	12.	$ 10.
13. **Entertainment, clubs, recreation, newspapers, magazines, and books**	13.	$ 30.
14. **Charitable contributions and religious donations**	14.	$ 50.
15. **Insurance.** Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	$ —
15b. Health insurance	15b.	$ —
15c. Vehicle insurance	15c.	$ —
15d. Other insurance. Specify:	15d.	$ —
16. **Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	$ ~~1,~~ 600. / MO. (~~YR.~~)
17. **Installment or lease payments:**		
17a. Car payments for Vehicle 1	17a.	$ —
17b. Car payments for Vehicle 2	17b.	$ —
17c. Other. Specify:	17c.	$ —
17d. Other. Specify:	17d.	$ —
18. **Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, *Schedule I, Your Income* (Official Form 106I).**	18.	$ —
19. **Other payments you make to support others who do not live with you.** Specify:	19.	$ —
20. **Other real property expenses not included in lines 4 or 5 of this form or on *Schedule I: Your Income*.**		
20a. Mortgages on other property	20a.	$ —
20b. Real estate taxes	20b.	$ —
20c. Property, homeowner's, or renter's insurance	20c.	$ —
20d. Maintenance, repair, and upkeep expenses	20d.	$ —
20e. Homeowner's association or condominium dues	20e.	$ —

Debtor 1 FERNANDO ARTURO SALCEDO
First Name Middle Name Last Name

Case number (if known) 17-40310-cec

21. **Other.** Specify: — 21. +$ —

22. **Calculate your monthly expenses.**

22a. Add lines 4 through 21.	22a.	$ 2,010
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	$ —
22c. Add line 22a and 22b. The result is your monthly expenses.	22c.	$ 2,010

23. **Calculate your monthly net income.**

23a. Copy line 12 (*your combined monthly income*) from *Schedule I.*	23a.	$ 2,000
23b. Copy your monthly expenses from line 22c above.	23b.	−$ 2,010
23c. Subtract your monthly expenses from your monthly income. The result is your *monthly net income*.	23c.	$ -10

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.
☐ Yes. Explain here:

Fill in this information to identify your case:

Debtor 1 FERNANDO ARTURO SAILLANT
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of N.Y.

Case number 17-40310-CEC
(If known)

Check if this is:

☐ An amended filing
☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J-2

Schedule J-2: Expenses for Separate Household of Debtor 2

12/15

Use this form for Debtor 2's separate household expenses ONLY IF Debtor 1 and Debtor 2 maintain separate households. *If Debtor 1 and Debtor 2 have one or more dependents in common, list the dependents on both Schedule J and this form. Answer the questions on this form only with respect to expenses for Debtor 2 that are not reported on Schedule J.* Be as complete and accurate as possible. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. **Do you and Debtor 1 maintain separate households?**
   - ☐ No. Do not complete this form.
   - ☐ Yes

2. **Do you have dependents?**
   Do not list Debtor 1 but list all other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on Schedule J.
   Do not state the dependents' names.
   - ☐ No
   - ☐ Yes. Fill out this information for each dependent..........................

Dependent's relationship to Debtor 2:	Dependent's age	Does dependent live with you?
		☐ No ☐ Yes
		☐ No ☐ Yes
		☐ No ☐ Yes
		☐ No ☐ Yes
		☐ No ☐ Yes

3. **Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1?**
   - ☐ No
   - ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

		Your expenses
4. **The rental or home ownership expenses for your residence.** Include first mortgage payments and any rent for the ground or lot.	4.	$
If not included in line 4:		
4a. Real estate taxes	4a.	$
4b. Property, homeowner's, or renter's insurance	4b.	$
4c. Home maintenance, repair, and upkeep expenses	4c.	$
4d. Homeowner's association or condominium dues	4d.	$

Debtor 1 ______________________________ Case number (*if known*)______________________
First Name Middle Name Last Name

		Your expenses
5. **Additional mortgage payments for your residence**, such as home equity loans	5.	$________
6. **Utilities:**		
6a. Electricity, heat, natural gas	6a.	$________
6b. Water, sewer, garbage collection	6b.	$________
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	$________
6d. Other. Specify: ______________	6d.	$________
7. **Food and housekeeping supplies**	7.	$________
8. **Childcare and children's education costs**	8.	$________
9. **Clothing, laundry, and dry cleaning**	9.	$________
10. **Personal care products and services**	10.	$________
11. **Medical and dental expenses**	11.	$________
12. **Transportation.** Include gas, maintenance, bus or train fare. Do not include car payments.	12.	$________
13. **Entertainment, clubs, recreation, newspapers, magazines, and books**	13.	$________
14. **Charitable contributions and religious donations**	14.	$________
15. **Insurance.** Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	$________
15b. Health insurance	15b.	$________
15c. Vehicle insurance	15c.	$________
15d. Other insurance. Specify: ______________	15d.	$________
16. **Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: ______________	16.	$________
17. **Installment or lease payments:**		
17a. Car payments for Vehicle 1	17a.	$________
17b. Car payments for Vehicle 2	17b.	$________
17c. Other. Specify: ______________	17c.	$________
17d. Other. Specify: ______________	17d.	$________
18. **Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, *Schedule I, Your Income* (Official Form 106I).**	18.	$________
19. **Other payments you make to support others who do not live with you.** Specify: ______________	19.	$________
20. **Other real property expenses not included in lines 4 or 5 of this form or on *Schedule I: Your Income.***		
20a. Mortgages on other property	20a.	$________
20b. Real estate taxes	20b.	$________
20c. Property, homeowner's, or renter's insurance	20c.	$________
20d. Maintenance, repair, and upkeep expenses	20d.	$________
20e. Homeowner's association or condominium dues	20e.	$________

Debtor 1 ______________________________ Case number (*if known*)______________
First Name Middle Name Last Name

21. **Other.** Specify: ______________________________ 21. +$__________

22. **Your monthly expenses.** Add lines 5 through 21.
The result is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedule J to calculate the total expenses for Debtor 1 and Debtor 2. 22. $__________

23. Line not used on this form.

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.
☐ Yes. Explain here:

Fill in this information to identify your case:

Debtor 1 Fernando Arturo Saillant
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of N.Y.

Case number 17-40310-CEC
(If known)

CLERK
U.S. BANKRUPTCY COURT
EASTERN DISTRICT OF
NEW YORK
2017 FEB 13 P 12:07
RECEIVED

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to $250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☐ No

☐ Yes. Name of person Fernando Arturo Saillant. Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

Fernando Arturo Saillant
Signature of Debtor 1

Signature of Debtor 2

Date 02 13 2017
MM / DD / YYYY

Date ______
MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1 Fernando Antonio Saillant
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the Eastern District of N.Y.

Case number 17-40310 CEC
(If known)

CLERK
U.S. BANKRUPTCY COURT
EASTERN DISTRICT OF
NEW YORK

2017 FEB 13 P 12:07

RECEIVED

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. **What is your current marital status?**

☐ Married
☒ Not married

2. **During the last 3 years, have you lived anywhere other than where you live now?**

☒ No
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
		☐ Same as Debtor 1	☐ Same as Debtor 1
Number Street	From ____ To ____	Number Street	From ____ To ____
City State ZIP Code		City State ZIP Code	
		☐ Same as Debtor 1	☐ Same as Debtor 1
Number Street	From ____ To ____	Number Street	From ____ To ____
City State ZIP Code		City State ZIP Code	

3. **Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?** (*Community property states and territories* include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☒ No
☐ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Part 2: Explain the Sources of Your Income

Debtor 1 ______________________________ Case number (if known)______________________
First Name Middle Name Last Name

4. **Did you have any income from employment or from operating a business during this year or the two previous calendar years?**
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

☐ No
☐ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	**Gross income** (before deductions and exclusions)	**Sources of income** Check all that apply.	**Gross income** (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	☐ Wages, commissions, bonuses, tips ☐ Operating a business	$________	☐ Wages, commissions, bonuses, tips ☐ Operating a business	$________
For last calendar year: (January 1 to December 31, ______) YYYY	☐ Wages, commissions, bonuses, tips ☐ Operating a business	$________	☐ Wages, commissions, bonuses, tips ☐ Operating a business	$________
For the calendar year before that: (January 1 to December 31, ______) YYYY	☐ Wages, commissions, bonuses, tips ☐ Operating a business	$________	☐ Wages, commissions, bonuses, tips ☐ Operating a business	$________

5. **Did you receive any other income during this year or the two previous calendar years?**
Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

☐ No
☐ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Describe below.	**Gross income from each source** (before deductions and exclusions)	**Sources of income** Describe below.	**Gross income from each source** (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	________	$________	________	$________
	________	$________	________	$________
	________	$________	________	$________
For last calendar year:	________	$________	________	$________
(January 1 to December 31, ______) YYYY	________	$________	________	$________
	________	$________	________	$________
For the calendar year before that:	________	$________	________	$________
(January 1 to December 31, ______) YYYY	________	$________	________	$________
	________	$________	________	$________

Debtor 1 ____________________ Case number (if known)____________
First Name Middle Name Last Name

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of $6,425* or more?

☐ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of $6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of $600 or more?

☐ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of $600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Creditor's Name Number Street City State ZIP Code		$	$	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors ☐ Other ______
Creditor's Name Number Street City State ZIP Code		$	$	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors ☐ Other ______
Creditor's Name Number Street City State ZIP Code		$	$	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors ☐ Other ______

Debtor 1 ______________________ Case number *(if known)*______________
First Name Middle Name Last Name

7. **Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**
Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☐ No
☐ Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name Number Street City State ZIP Code		$	$	
Insider's Name Number Street City State ZIP Code		$	$	

8. **Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**
Include payments on debts guaranteed or cosigned by an insider.

☐ No
☐ Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name Number Street City State ZIP Code		$	$	
Insider's Name Number Street City State ZIP Code		$	$	

Debtor 1 ______________________________
First Name Middle Name Last Name

Case number (if known)______________________

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. **Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**
List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

☐ No
☐ Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
Case title ____________ ____________ Case number ____________		____________ Court Name ____________ Number Street ____________ City State ZIP Code	☐ Pending ☐ On appeal ☐ Concluded
Case title ____________ ____________ Case number ____________		____________ Court Name ____________ Number Street ____________ City State ZIP Code	☐ Pending ☐ On appeal ☐ Concluded

10. **Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**
Check all that apply and fill in the details below.

☐ No. Go to line 11.
☐ Yes. Fill in the information below.

	Describe the property	Date	Value of the property
____________ Creditor's Name ____________ Number Street ____________ ____________ City State ZIP Code	 **Explain what happened** ☐ Property was repossessed. ☐ Property was foreclosed. ☐ Property was garnished. ☐ Property was attached, seized, or levied.	________	$________
____________ Creditor's Name ____________ Number Street ____________ ____________ City State ZIP Code	 **Explain what happened** ☐ Property was repossessed. ☐ Property was foreclosed. ☐ Property was garnished. ☐ Property was attached, seized, or levied.	________	$________

Debtor 1 ______________________ First Name Middle Name Last Name   Case number (*if known*)______________

11. **Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?**

☐ No
☐ Yes. Fill in the details.

	Describe the action the creditor took	Date action was taken	Amount
Creditor's Name		________	$________
Number Street			
City State ZIP Code	Last 4 digits of account number: XXXX–___ ___ ___ ___		

12. **Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?**

☐ No
☐ Yes

Part 5: List Certain Gifts and Contributions

13. **Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than $600 per person?**

☐ No
☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than $600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift		________	$________
		________	$________
Number Street			
City State ZIP Code			
Person's relationship to you ________			

Gifts with a total value of more than $600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift		________	$________
		________	$________
Number Street			
City State ZIP Code			
Person's relationship to you ________			

Debtor 1 ______________________ Case number *(if known)* ______________________
First Name Middle Name Last Name

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than $600 to any charity?

☐ No
☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than $600	**Describe what you contributed**	**Date you contributed**	**Value**
Charity's Name		________	$________
		________	$________
Number Street			
City State ZIP Code			

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

☐ No
☐ Yes. Fill in the details.

Describe the property you lost and how the loss occurred	**Describe any insurance coverage for the loss** Include the amount that insurance has paid. List pending insurance claims on line 33 of *Schedule A/B: Property.*	**Date of your loss**	**Value of property lost**
		________	$________

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?
Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☐ No
☐ Yes. Fill in the details.

	Description and value of any property transferred	**Date payment or transfer was made**	**Amount of payment**
Person Who Was Paid			
Number Street		________	$________
		________	$________
City State ZIP Code			
Email or website address			
Person Who Made the Payment, if Not You			

Debtor 1 ______________________________ Case number (if known)______________
First Name Middle Name Last Name

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid Number Street City State ZIP Code Email or website address Person Who Made the Payment, if Not You		________ ________	$________ $________

17. **Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**
Do not include any payment or transfer that you listed on line 16.

☐ No
☐ Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid Number Street City State ZIP Code		________ ________	$________ $________

18. **Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**
Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).
Do not include gifts and transfers that you have already listed on this statement.

☐ No
☐ Yes. Fill in the details.

	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you ________			________
Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you ________			________

Debtor 1 ______ First Name Middle Name Last Name

Case number (*if known*)______

19. **Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary?** (These are often called *asset-protection devices*.)

☐ No
☐ Yes. Fill in the details.

	Description and value of the property transferred	Date transfer was made
Name of trust ______		______

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. **Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?**
Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

☐ **No**
☐ **Yes. Fill in the details.**

	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Name of Financial Institution Number Street City State ZIP Code	XXXX–__ __ __ __	☐ Checking ☐ Savings ☐ Money market ☐ Brokerage ☐ Other______	______	$______
Name of Financial Institution Number Street City State ZIP Code	XXXX–__ __ __ __	☐ Checking ☐ Savings ☐ Money market ☐ Brokerage ☐ Other______	______	$______

21. **Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?**

☐ **No**
☐ **Yes. Fill in the details.**

	Who else had access to it?	Describe the contents	Do you still have it?
Name of Financial Institution Number Street City State ZIP Code	Name Number Street City State ZIP Code		☐ No ☐ Yes

Debtor 1 ______ First Name Middle Name Last Name Case number (if known)______

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

☐ No
☐ Yes. Fill in the details.

	Who else has or had access to it?	Describe the contents	Do you still have it?
Name of Storage Facility	Name		☐ No
Number Street	Number Street		☐ Yes
City State ZIP Code	City State ZIP Code		☐

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

☐ No
☐ Yes. Fill in the details.

	Where is the property?	Describe the property	Value
Owner's Name			$______
Number Street	Number Street		
City State ZIP Code	City State ZIP Code		

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- ***Environmental law*** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- ***Site*** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- ***Hazardous material*** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

☐ No
☐ Yes. Fill in the details.

	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit		______
Number Street	Number Street		
City State ZIP Code	City State ZIP Code		

Debtor 1 ______ First Name Middle Name Last Name Case number *(if known)*______

25. Have you notified any governmental unit of any release of hazardous material?

- [ ] **No**
- [ ] **Yes. Fill in the details.**

	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street		
City State ZIP Code	City State ZIP Code		

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- [ ] **No**
- [ ] **Yes. Fill in the details.**

	Court or agency	Nature of the case	Status of the case
Case title______	Court Name		☐ Pending
	Number Street		☐ On appeal
Case number	City State ZIP Code		☐ Concluded

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- [ ] A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- [ ] A member of a limited liability company (LLC) or limited liability partnership (LLP)
- [ ] A partner in a partnership
- [ ] An officer, director, or managing executive of a corporation
- [ ] An owner of at least 5% of the voting or equity securities of a corporation

- [ ] **No. None of the above applies. Go to Part 12.**
- [ ] **Yes. Check all that apply above and fill in the details below for each business.**

	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Business Name		EIN: __ __ – __ __ __ __ __ __ __
Number Street	Name of accountant or bookkeeper	Dates business existed
City State ZIP Code		From ______ To ______

	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Business Name		EIN: __ __ – __ __ __ __ __ __ __
Number Street	Name of accountant or bookkeeper	Dates business existed
City State ZIP Code		From ______ To ______

Debtor 1 ______________________ Case number (if known)______________________
First Name Middle Name Last Name

______________________ Business Name ______________________ Number Street ______________________ ______________________ City State ZIP Code	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. EIN: __ __ – __ __ __ __ __ __ __ Dates business existed From ______ To ______

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

☐ No
☐ Yes. Fill in the details below.

______________________ Name ______________________ Number Street ______________________ ______________________ City State ZIP Code	Date issued ______ MM / DD / YYYY

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to $250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

[signature] ______________________
Signature of Debtor 1

____
Signature of Debtor 2

Date 2/13/17

Date ______

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

☐ No
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ No
☐ Yes. Name of person______________________. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).